

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Application of:

OTFRIED SCHWARZKOPF, ET AL

Serial No. 10/560996

Filing Date: December 16, 2005

AXIAL PISTON COMPRESSOR, PARTICULARLY A COMPRESSOR FOR THE AIR CONDITIONING SYSTEM OF A MOTOR VEHICLE

CERTIFICATE OF MAILING

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Marlene Kubiak

02/01/07

Date

REQUEST FOR STATUS

Commissioner for Patents
Mail Stop - PCT
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Applicant wishes to request the status of the above application. A duplicate of this

Request is enclosed.

To date, no action has been received from the United States Patent & Trademark Office in connection with this application. The Preliminary Amendment and Supplement to Transmittal Letter were mailed on December 16, 2005 and received the above serial number.

Respectfully submitted,


Gary A. Essmann (Reg. No. 29,376)

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414-271-7590
Atty. Docket No. 825-00191

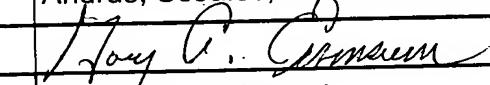
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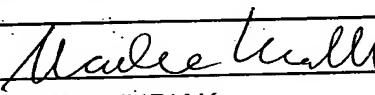
Total Number of Pages in This Submission

Application Number	10/560996
Filing Date	December 16, 2005
First Named Inventor	Otfried Schwarzkopf
Art Unit	
Examiner Name	
Attorney Docket Number	825-00191

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input checked="" type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Return Receipt Postcard
Remarks		
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT		
Firm Name	Andrus, Sceales, Starke & Sawall, LLP	
Signature		
Printed name	GARY A. ESSMANN	
Date	February 1, 2007	Reg. No. 29,376

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Signature	
Typed or printed name	MARLENE KUBIAK
Date	February 1, 2007

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